FORM D

### **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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SEC USE ONLY

Serial



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPLION

RECEIVED

DATE RECEIVED

Prefix

Name of Offering (  check is UBS Global Merger Art	this is an amendment and name pitrage Limited	e has changed, an	d indicate chan	121.80		PROCESSED
Filing Under (Check box(es) tha	t apply): 🔲 Rule 504 📗 Ru	le 505 🛛 Rule	506 🗌 Sect	ion4(6) UI	LOE /	1
Type of Filing: New Fili	ng Amendment					AUG 2 1 2002
	A. BA	SIC IDENTIFIC	ATION DATA			THOMSON
Enter the information requester	ed about the issuer					FINANCIAL
Name of Issuer ( check if this UBS Global Merger Ar		s changed, and in	dicate change.)			
Address of Executive Offices (Na c/o UBS (Cayman Islands) Ltd., U Grand Cayman, Cayman Islands, I	JBS House, P.O. Box 852, 227 F		orge Town,	Telephone I	Number (Inclu (345) 914	iding Area Code) 4-1076
Address of Principal Business Op (if different from Executive Office	perations (Number and Street, C	ity, State, Zip Co	de)	Telephone 1	Number (Inclu	iding Area Code)
Brief Description of Business	To operate as a private investr	nent company				
Type of Business Organization				<del></del>		
☐ corporation	limited partnership, a	Iready formed	⊠ ot	ther (please spec	ify): A Cayma compar	nn Islands exempted ny
business trust	☐ limited partnership, t	o be formed				
Actual or Estimated Date of Inco	rporation or Organization:	Month _05	Year 00		☐ Estimate	ed
Jurisdiction of Incorporation or C	Organization (Enter two-letter U. CN for Canada; Fl			or State:	FN	

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



			A. BASIC IDEN	TIFICATION DATA		
2.	Enter the informati	on requested for th	e following:			
	o Each promote	r of the issuer, if th	e issuer has been organized	within the past five years;		
	o Each benefici of the issuer;	al owner having the	e power to vote or dispose,	or direct the vote or disposition	n of, 10% or more o	f a class of equity securities
	o Each executiv	e officer and direct	or of corporate issuers and	of corporate general and mana	ging partners of par	tnership issuers; and
	o Each general	and managing part	ner of partnership issuers.			
Check l	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Na	ıme (Last name first, i Douglas, Richard I			١		
Busines Indies	ss or Residence Addre c/o UBS (Cayman l		er and Street, City, State, Zip House, P.O. Box 852, 227 El	o Code) gin Avenue, George Town, Gra	and Cayman, Cayma	n Islands, British West
Check l	Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Na	ame (Last name first, i					
Busines Indies	Walmsley, William ss or Residence Addre c/o UBS (Cayman I	ess (Numbe	er and Street, City, State, Zig- House, P.O. Box 852, 227 El	o Code) gin Avenue, George Town, Gra	and Cayman, Cayma	n Islands, British West
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Na	ume (Last name first, i Moore, John C.	f individual)		- A. M. J.		
Busines Indies	ss or Residence Addre c/o UBS (Cayman I		er and Street, City, State, Zip House, P.O. Box 852, 227 El	o Code) gin Avenue, George Town, Gra	and Cayman, Cayma	n Islands, British West
Check l	Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Na	ıme (Last name first, i	f individual)				<del></del>
Busines	ss or Residence Addre	ess (Number	er and Street, City, State, Zij	o Code)		<del></del>
Check l	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ıme (Last name first, i	f individual)				
Busines	ss or Residence Addre	ess (Numbe	er and Street, City, State, Zij	p Code)		
Check 1	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first, i	f individual)				
Busines	ss or Residence Addre	ess (Numbe	er and Street, City, State, Zi	p Code)		<del></del>
		(Use blan	k sheet, or copy and use add	litional copies of this sheet, as	necessary.)	

9242502.1

					B.	INFORMA	TION AB	OUT OFFE	RING				
1.	Has the	issuer sol	d, or does t	he issuer in						?	Yes	No	
	A	inswer also	o in Append	ix, Colum	n 2, if filin	g under UL	OE.		_		_	_	
2.			num investr he discretio						••••••••••	••••••		* 000,000	
3.	Does th	e offering	permit join	t ownershi	n of a singl	e unit					Ye: ⊠	s No	
4.	Enter th	ne informa	tion reques	ted for each	ı person wi	no has been	or will be	paid or giv	en, directly	or indirect	ly, any con	nmission or	similar
													sociated person or
												If more the er or dealer	
	Applica		d are assue	iateu perso	iis of sucii	a blokel bi	dealer, you	i iliay set it	nui uie iiii	mination 10	i illat bloki	ei oi dealei	only. Not
Full Nar			t, if individ	ual)									<u> </u>
Business	or Res	idence Ado	dress (Num	ber and Str	eet, City, S	State, Zip C	ode)						
Name of	Associa	ated Broke	r or Dealer										
						4.1.							
			ted Has Sol or check in			olicit Purch	asers						l States
Ţ	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	MT] RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Nar	ne (Last	name first	t, if individ	ual)		<u></u>							
Business	or Resi	idence Ado	dress (Num	ber and Str	eet, City, S	State, Zip C	ode)						
Name of	Associa	ated Broke	er or Dealer										
			ted Has Sol or check in			olicit Purch	asers					☐ Al	l States
[	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[НП	[ID]
j	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Nar	ne (Last	name first	t, if individ	ual)							<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Business	s or Res	idence Ado	dress (Num	ber and Str	eet, City, S	State, Zip C	ode)		·				
Name of	f Associa	ated Broke	er or Dealer										
States in	which l	Person Lis	ted Has So	licited or Ir	ntends to So	nlicit Purch	asers			·	<del></del>		
			or check in			onen i uieli						☐ Al	1 States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already so "none" or "zero". If the transaction is an exchange offering, check this box [ ] and indicate in the co the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$0	\$0	)
	Equity	\$300,000,000	<u> </u>	38,474,543.71
	[X]Common[ ]Preferred			
	Convertible Securities (including warrants)	\$0	\$0	)
	Partnership Interests	\$0	\$(	)
	Other (Specify )	\$0	<u> </u>	)
	Total	\$300,000,000	<b>\$</b> 3	38,474,543.71
	Answer also in Appendix, Column 3, if filing under ULOE.			<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this off amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have paggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		nd th	ne :
		Number Investors	Α	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	<u>\$3</u>	38,474,543.71
	Non-accredited Investors	0	\$(	)
	Total (for filing under Rule 504 only)		\$	
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this off type listed in Part C - Question 1.	ering. Classify securi		by
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A		_	\$
	Rule 504		_	\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securitie amounts relating solely to organization expenses of the issuer. The information may be given as subjet the amount of an expenditure is not known, furnish an estimate and check the box to the left of the est	s in this offering. Exc ct to future contingen		
	Transfer Agent's Fees	[	]	\$0
	Printing and Engraving Costs	[ x	]	<u>\$*</u>
	Legal Fees	[ x	]	<u>\$*</u>
	Accounting Fees	[ x	]	\$*
	Engineering Fees	[	]	\$0
	Sales Commissions (specify finders' fees separately)	[	]	\$0
	Other Expenses (identify)	[ x	]	\$*
	Total	[ x	]	\$250,000*

<sup>\*</sup>All offering and organizational expenses are estimated not to exceed \$250,000.

Indicate below the amount of the adjusted gross proceeds to the is purposes shown. If the amount for any purpose is not known, furnestimate. The total of the payments listed must equal the adjusted	nish an estir	mate	and c	heck the box to the	e left	of the		. 1.
C - Question 4.b above.								
				Payments to Officers, Directors, & Affiliates			Payments to Others	
Salaries and fees		. [	]	\$	[	1	\$	•
Purchase of real estate		f	]	\$	[	].	\$	•
Purchase, rental or leasing and installation of machinery and equip	pment	ſ	]	\$	[	]	\$	
Construction or leasing of plant buildings and facilities	*************	ſ	]	\$	[	]	\$	-
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assessecurities of another issuer pursuant to a merger)		[		\$	[	]	\$	· ·
Repayment of indebtedness		٢	1	\$	Г	]	\$	
Working capital		-	]	\$	[	]	\$	
Other (specify): investment capital in the following master fund:	UBS		x ]	\$299,750,000	· [	]	\$	•
Global Merger Arbitrage Master Limited.								
Column Totals		[ ]	x j	\$299,750,000		1	\$	
Total Payments Listed (column totals added)	•••••		•	[X] <u>\$</u>	299,′	, 50,0	00	•
D. FED	ERAL SIG	NAT	JRE				· · · · · · · · · · · · · · · · · · ·	
issuer has duly caused this notice to be signed by the undersigned of ature constitutes an undertaking by the issuer to furnish to the U.S. rmation furnished by the issuer to any non-accredited investor purs	Securities a	and E	xchai	nge Commission, i				
er (Print or Type)	Signature		u/	•		D	ate p/a/-	-
S Global Merger Arbitrage Limited	for	N	lo	ore			8/9/20	20,5
ne of Signer (Print or Type)	itle of Sign	er (P	rint o	r Type)				
	Di	recto	r					·
n C. Moore							·	
n C. Moore							·	
n C. Moore								

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

	E STATE SIGNATURE
1.	Yes No Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response. Not applicable
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not applicable
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not applicable
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the lersigned duly authorized person.
	uer (Print or Type) S Global Merger Arbitrage Limited  Signature  Date 8/9/2002
Na	me (Print or Type)  Title (Print or Type)  Director
Joh	n C. Moore

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

UBS Global Mer	ger A	Arbitrage	Limited

1	2		3	Global Wie	Hobai Merger Arbitrage Limited  4						
1	Intend to non-accordinvestors (Part B-	sell to redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type o	Type of investor and amount purchased in State  (Part C-Item 2)				5 Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Class B Shares Par Value U.S. \$0.01 Per Share \$300,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL			,								
AK											
AZ											
AR											
CA	•										
СО									·		
СТ		X	X	2	\$25,351,750	0	0		:		
DE									-		
DC									,		
FL											
GA											
HI											
ID											
IL		X	X	2	\$6,010,233.71	0	0				
IN									:		
IA											
KS									•		
KY							· · · · · · · · · · · · · · · · · · ·				
LA											
ME											
MD											
MA											
MI											
MN											
MS											
МО											
MT											

**APPENDIX** 

	UBS	Global Me	rger Art	oitrage L	imited_	
_ _				1		

	UBS Global Merger Arbitrage Limited									
1	2		3		4		5 Not Applicable			
	Intend to non-acci investors (Part B-)	redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	No	Class B Shares Par Value U.S. \$0.01 Per Share \$300,000,000	Number of Accredited Investors	(Part C-l	Number of Non- Accredited Investors	Amount	Yes	No	
NE										
NV										
NH										
NJ										
NM										
NY		X	X	2	\$8,112,560	0	0			
NC										
ND										
ОН					-				÷	
OK										
OR										
PA							-			
RI									1	
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										